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**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
COMMITTEE TO ELECT MEL M MARIN

ADDRESS (number and street) 101 BOX 1651
Check if different than previously reported. (ACC) Hermitage PA 16148

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C00481168 3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A) PA 13

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
☐ April 15 Quarterly Report (Q1)
☐ July 15 Quarterly Report (Q2)
☐ October 15 Quarterly Report (Q3)
☒ January 31 Year-End Report (YE)
☐ Termination Report (TER)
(b) 12-Day PRE-Election Report for the:
☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)
Election on MM/DD/YYYY in the State of
(c) 30-Day POST-Election Report for the:
☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY
10/01/2009 through 12/31/2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer me
Signature of Treasurer Date 07/12/2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.